

Child Care Provider Pediatric CPR/First Aid Training Verification

Provider Name: _____ Phone Number: _____

Provider Address: _____ City: _____ Zip: _____

License Number: _____ Subsidy Provider ID/Organization Number: _____

Recent federal changes made with the reauthorization of the Child Care and Development Block Grant Act requires providers who care for children receiving Subsidy to complete specific health and safety trainings, keep records for the children they provide care for, and complete an Emergency Preparedness Plan.

All Subsidy providers are now required to have **all of directors, staff, and substitutes** that work directly with children trained and certified in Pediatric First Aid and Cardiopulmonary Resuscitation (CPR).

Please submit the following information regarding staff training for your child care center to your assigned Resource Developer. If more spots are needed, please submit the same information on another piece of paper:

Name of Staff:	Position/Title:	Date of CPR/First Aid Completion:
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Failure to submit this information may result in closure of your Child Care Subsidy Agreement. Verification of completion of these trainings may be requested upon Department's review.

Director Signature: _____

Director signature above attests the above information is true and accurate.